

FCSTN Partnership Award Application Form

The purpose of the FCSTN Partnership Award is to recognize a company, business and/or their representative(s) who has address or focused on a family issue(s) that we as educators are also concerned with in the classroom. The recipient has taken action to address the issue(s) either through public awareness, policy, financial contribution, personal time, and/or investment to make a difference in the lives of families throughout Nebraska.

Name of Nominee: _____

Address: _____

Phone: _____

Describe the programs used by the nominated company, business or agency to address family concerns.

What was or is the purpose of these programs?

Who is responsible for the administration or production of these programs?

Describe the effectiveness of these programs.

Why is this company, business or agency deserving of this award?

Please add attachments as needed and return to the Partnership Award Chairperson,
Kristin Warner, Shelton High School, Box 610, Shelton NE 68876-0610